

| ORDER FOR SUPPLIES OR SERVICES | | | | | | | | | | PAGE 1 OF 4 | | |
|--|--|--|--|---------------------|--|--|--|--|---|---|--|--|
| 1. CONTRACT PURCH ORDER/AGREEMENT NO. <div style="border: 1px solid black; padding: 2px;">DAAE07-03-P-M045</div> | | | 2. DELIVERY ORDER/CALL NO. | | 3. DATE OF ORDER/CALL (YYYYMMDD) <div style="border: 1px solid black; padding: 2px;">2003MAR19</div> | | 4. REQUISITION/PURCH REQUEST NO. <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div> | | 5. PRIORITY <div style="border: 1px solid black; padding: 2px;">DOA4</div> | | | |
| 6. ISSUED BY TACOM SFAE-CSS-LV-P WARDELL DYSON (586)574-8359 WARREN, MICHIGAN 48397-5000 EMAIL: DYSONW@TACOM.ARMY.MIL HTTP://CONTRACTING.TACOM.ARMY.MIL | | | CODE <div style="border: 1px solid black; padding: 2px;">W56HZV</div> | | 7. ADMINISTERED BY (If other than 6) <div style="border: 1px solid black; padding: 2px;">DCMA AMERICAS (CANADA) 275 BANK STREET, SUITE 200 OTTAWA, ONT., CN K2P 2L6</div> | | | CODE <div style="border: 1px solid black; padding: 2px;">SCN01A</div> | | 8. DELIVERY FOB <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> DESTINATION <input checked="" type="checkbox"/> OTHER (See Schedule if other)</div> | | |
| 9. CONTRACTOR <div style="border: 1px solid black; padding: 2px;">CANADIAN COMMERCIAL CORP 50 OCONNOR SUITE 1100 OTTAWA ONTARIO CANADA K1A0S6</div> | | | CODE <div style="border: 1px solid black; padding: 2px;">98247</div> | | FACILITY <div style="border: 1px solid black; padding: 2px;">C</div> | | NONE <div style="border: 1px solid black; padding: 2px;">HQ0337</div> | | 10. DELIVER TO FOB POINT BY (Date) (YYYYMMDD) <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div> | | | |
| 11. X IF BUSINESS IS <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> SMALL <input type="checkbox"/> SMALL DISADVANTAGED <input type="checkbox"/> WOMAN-OWNED</div> | | | 12. DISCOUNT TERMS <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div> | | | 13. MAIL INVOICES TO THE ADDRESS IN BLOCK <div style="border: 1px solid black; padding: 2px;">See Block 15</div> | | | | | | |
| 14. SHIP TO <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div> | | | CODE <div style="border: 1px solid black; padding: 2px;"></div> | | 15. PAYMENT WILL BE MADE BY <div style="border: 1px solid black; padding: 2px;">DFAS - COLUMBUS CENTER DFAS-CO/NORTH ENTITLEMENT OPERATION P.O. BOX 182266 COLUMBUS OH 43218-2266</div> | | | | CODE <div style="border: 1px solid black; padding: 2px;">HQ0337</div> | | MARK ALL PACKAGES AND PAPERS WITH IDENTIFICATION NUMBERS IN BLOCKS 1 AND 2 | |
| 16. TYPE OF ORDER <div style="border: 1px solid black; padding: 2px;">DELIVERY/ CALL PURCHASE X THIS DELIVERY ORDER IS ISSUED ON ANOTHER GOVERNMENT AGENCY OR IN ACCORDANCE WITH AND SUBJECT TO TERMS AND CONDITIONS OF ABOVE NUMBERED CONTRACT. Reference your <input type="checkbox"/> Oral <input checked="" type="checkbox"/> Written Quotation <u>INVOICES</u>, Dated <u>2003MAR07</u>. <u>CCC-OTTAWA</u> furnish the following on terms specified herein. ACCEPTANCE. THE CONTRACTOR HEREBY ACCEPTS THE OFFER REPRESENTED BY THE NUMBERED PURCHASE ORDER AS IT MAY PREVIOUSLY HAVE BEEN OR IS NOW MODIFIED, SUBJECT TO ALL OF THE TERMS AND CONDITIONS SET FORTH, AND AGREES TO PERFORM THE SAME.</div> | | | | | | | | | | | | |
| NAME OF CONTRACTOR SIGNATURE TYPED NAME AND TITLE DATE SIGNED (YYYYMMDD) <div style="border: 1px solid black; padding: 2px;"><input checked="" type="checkbox"/> If this box is marked, supplier must sign Acceptance and return the following number of copies:</div> | | | | | | | | | | | | |
| 17. ACCOUNTING AND APPROPRIATION DATA/LOCAL USE <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE</div> | | | | | | | | | | | | |
| FMS REQUIREMENT | | | | | | | | | | | | |
| 18. ITEM NO. | | 19. SCHEDULE OF SUPPLIES/SERVICE <div style="border: 1px solid black; padding: 2px;">SEE SCHEDULE CONTRACT TYPE: Firm-Fixed-Price KIND OF CONTRACT: Service Contracts</div> | | | | 20. QUANTITY ORDERED/ ACCEPTED* | | 21. UNIT | 22. UNIT PRICE | | 23. AMOUNT | |
| * If quantity accepted by the Government is same as quantity ordered, indicate by X. If different, enter actual quantity accepted below quantity ordered and encircle. | | 24. UNITED STATES OF AMERICA MICHAEL T. FINNELL /SIGNED/ FINNELLM@TACOM.ARMY.MIL (586)574-8361 BY: CONTRACTING/ORDERING OFFICER | | | | | | 25. TOTAL <div style="border: 1px solid black; padding: 2px;">\$41,221.00</div> | | 26. DIFFERENCES <div style="border: 1px solid black; padding: 2px;"></div> | | |
| 27a. QUANTITY IN COLUMN 20 HAS BEEN <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> INSPECTED <input type="checkbox"/> RECEIVED <input type="checkbox"/> ACCEPTED, AND CONFORMS TO CONTRACT EXCEPT AS NOTED</div> | | | | | | | | | | | | |
| b. SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE | | | | | | c. DATE (YYYYMMDD) | | d. PRINTED NAME AND TITLE OF AUTHORIZED GOVERNMENT REPRESENTATIVE | | | | |
| e. MAILING ADDRESS OF AUTHORIZED GOVERNMENT REPRESENTATIVE | | | | | | 28. SHIP. NO. <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL</div> | | 29. D.O. VOUCHER NO. | | 30. INITIALS <div style="border: 1px solid black; padding: 2px;"></div> | | |
| f. TELEPHONE NUMBER | | | g. E-MAIL ADDRESS | | | 31. PAYMENT <div style="border: 1px solid black; padding: 2px;"><input type="checkbox"/> COMPLETE <input type="checkbox"/> PARTIAL <input type="checkbox"/> FINAL</div> | | 32. PAID BY | | 33. AMOUNT VERIFIED CORRECT FOR | | |
| 36. I CERTIFY THIS ACCOUNT IS CORRECT AND PROPER FOR PAYMENT. | | | | | | 34. CHECK NUMBER | | 35. BILL OF LADING NO. | | | | |
| a. DATE (YYYYMMDD) | | b. SIGNATURE AND TITLE OF CERTIFYING OFFICER | | | | 37. RECEIVED AT | | 38. RECEIVED BY (Print) | | 39. DATE RECEIVED (YYYYMMDD) | | |
| 40. TOTAL CONTAINERS | | 41. S/R ACCOUNT NUMBER | | 42. S/R VOUCHER NO. | | | | | | | | |

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|--|---|---------------------------|
| CONTINUATION SHEET | Reference No. of Document Being Continued PIIN/SIIN DAAE07-03-P-M045 MOD/AMD | Page 2 of 4 |
| Name of Offeror or Contractor: CANADIAN COMMERCIAL CORP | | |

SUPPLEMENTAL INFORMATION

- 1. The purpose of this Purchase Order is to pay Canadian Commercial Corporation-Ottawa (CCC-Ottawa) for Euro Account transactions identified in modification P00005, contract DAAE07-00-C-X075 which is the Light Armored Vehicle-Assault Gun contract for the Saudi Arabia National Guard.
- 2. The Government is in possession of receipts, vouchers, etc., which justify costs incurred by CCC-Ottawa in connection with modification P00005, contract DAAE07-00-C-X075; therefore, full payment in the amount of \$41,221 to CCC-Ottawa by this purchase order discharges the aforementioned agreement.
- 3. Any and all claims for adjustment beyond the terms set forth in contract modification P00005 of contract DAAE07-00-C-X075, or this purchase order, are hereby waived and released.
- 4. Contractor will submit DD Form 250 "Material Inspection & Receiving Report" to the Contracting Officer for signature.

*** END OF NARRATIVE A 001 ***

| ITEM NO | SUPPLIES/SERVICES | QUANTITY | UNIT | UNIT PRICE | AMOUNT | | | | | | |
|---------------|--|----------|------------|---------------|-----------------------------|-----|------------------------|--|--|--|-------------|
| 0001 | <p>SUPPLIES OR SERVICES AND PRICES/COSTS</p> <p>PAY FOR EURO ACCOUNT TRANSACTIONS</p> <p>NOUN: EURO PROJECT PAYMENT SECURITY CLASS: Unclassified</p> <p>PRON: J512T332EH PRON AMD: 01 ACRN: AA AMS CD: JBP002 CUSTOMER ORDER NO: J51JBP02EHSI FMS CASE IDENTIFIER: SI-B-JBP</p> <p>Inspection and Acceptance INSPECTION: Origin ACCEPTANCE: Origin</p> <p>Deliveries or Performance</p> <table><tr><td>DLVR SCH</td><td>PERF COMPL</td></tr><tr><td><u>REL CD</u></td><td><u>QUANTITY</u> <u>DATE</u></td></tr><tr><td>001</td><td>0 31-MAR-2003 (E)</td></tr></table> <p>\$ 41,221.00</p> | DLVR SCH | PERF COMPL | <u>REL CD</u> | <u>QUANTITY</u> <u>DATE</u> | 001 | 0 31-MAR-2003 (E) | | | | \$41,221.00 |
| DLVR SCH | PERF COMPL | | | | | | | | | | |
| <u>REL CD</u> | <u>QUANTITY</u> <u>DATE</u> | | | | | | | | | | |
| 001 | 0 31-MAR-2003 (E) | | | | | | | | | | |

Name of Offeror or Contractor: CANADIAN COMMERCIAL CORP

CONTRACT ADMINISTRATION DATA

| | | | | | JOB | | |
|-------------|----------------------|-------------|--|--|----------------|----------------|---------------|
| LINE | PRON/ | OBLG | | | ORDER | ACCOUNTING | OBLIGATED |
| <u>ITEM</u> | <u>AMS CD</u> | <u>ACRN</u> | <u>STAT</u> | <u>ACCOUNTING CLASSIFICATION</u> | <u>NUMBER</u> | <u>STATION</u> | <u>AMOUNT</u> |
| 0001 | J512T332EH | AA | 2 | 9711 X8242SIO1X6D1000JBP 0022572SIS20113 | 1FMJLF | W56HZV \$ | 41,221.00 |
| JBP002 | | | | | | | |
| | | | | | | TOTAL \$ | 41,221.00 |
| | | | | | | | |
| SERVICE | | | | | ACCOUNTING | | OBLIGATED |
| <u>NAME</u> | <u>TOTAL BY ACRN</u> | | <u>ACCOUNTING CLASSIFICATION</u> | | <u>STATION</u> | <u>AMOUNT</u> | |
| Army | AA | | 9711 X8242SIO1X6D1000JBP 0022572SIS20113 | | W56HZV | \$ | 41,221.00 |
| | | | | | | TOTAL \$ | 41,221.00 |